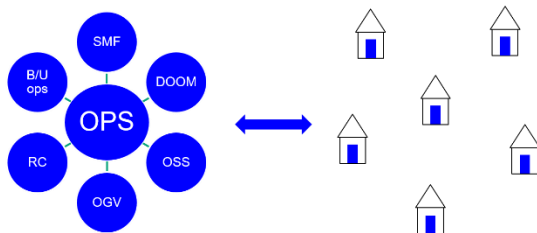


COVID-19 Schriever Frequently Asked Questions
CAO: 27 Mar 2020

Question: Will Schriever operations crews be directed to sequester in the Restricted Area for an extended period of time?

Answer: At this time, it is not the primary course of action planned by the 50 SW/Installation Commander. The current course of action is to limit COVID-19 exposure through distributed isolation (commuting to/from houses). However, planning is underway to determine the resources required to individuals should sequestering crews be directed. Shower, laundry, medical and meal services will be severely stressed/limited in this scenario.

Mass Forces in Local Area = Schedule Flexibility & Unity of Command/Effort

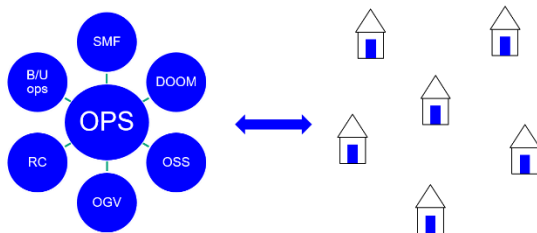


Limit COVID-19 Exposure Through Distributed Isolation

Question: Will Schriever operations crews be directed to shelter in local hotels for an extended period of time?

Answer: At this time, it is not the primary course of action planned by the 50 SW/Installation Commander. The current course of action is to limit COVID-19 exposure through distributed isolation (commuting to/from houses).

Mass Forces in Local Area = Schedule Flexibility & Unity of Command/Effort

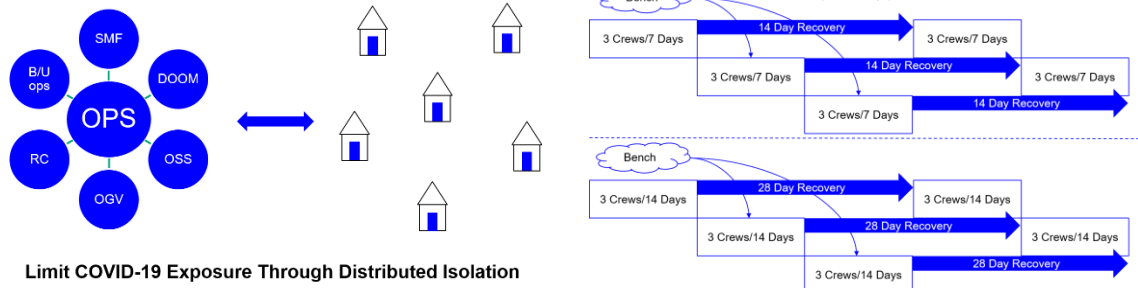


Limit COVID-19 Exposure Through Distributed Isolation

Question: Will Schriever operations crews be directed to divert crew members to prepare alternate operations locations to further socially isolate?

Answer: At this time, it is not the primary course of action planned by the 50 SW/Installation Commander. The current course of action is to mass forces at the primary operating location to provide commander flexibility and unity of command.

Mass Forces in Local Area = Schedule Flexibility & Unity of Command/Effort



Question: Who can enter Schriever AFB?

Answer: In Health Protection Condition Charlie (HPCON C), base access is limited to official business or residents only. *Attending a medical appointment is considered official business.

Question: Who can enter the Schriever AFB restricted area?

Answer: Restricted area access is authorized only for mission essential personnel identified on an entry access list (EAL) managed by 50 MSG.

Question: How are non-mission essential and high-risk civilian personnel managed?

Answer: Non-mission essential and high-risk civilian personnel will either be placed on an administrative leave status (weather and safety) or a situational telework status, based on the position they hold and resources available. If the individual becomes ill, sick leave is appropriate. Commanders will use discretion based on mission requirements. Direct questions regarding civilian employment matters to Alisha Davis at alisha.davis@us.af.mil.

Question: Is any thorough cleaning service available beyond daily crew wipe-down?

Answer: The 50 SW has created a Rapid Response Decontamination Detail. This is a 24/7, on-call, trained and equipped deep cleaning team to sanitize potentially contaminated high-traffic areas and operations floors following the identification of a symptomatic or COVID-19 positive member. Currently, the 50 SW only has the personnel available to support 50 SW areas. For any units desiring a similar capability, identify a detail of people (four minimum) and contact Capt Jim Selix at 719-237-1929 to schedule training.

Question: How can isolated, quarantined, and high-risk personnel receive basic sustenance?

Answer: The 50 SW has created a Joint Effort Delivery Initiative to support quarantined, isolated, or high-risk members that require basic sustenance through coordinated delivery service. This service is currently only available to 50 SW members. For further information, please contact Capt Ron Nguyen at Ronald.Nguyen.1@us.af.mil or 714-468-9503. For information how to establish a similar effort in organizations outside the 50 SW, contact Capt Nguyen.

Question: How do commanders manage quarantined asymptomatic members?

Answer: Commanders have discretion of the length of quarantine for asymptomatic members who have been potentially exposed to COVID-19, through travel, either locally or internationally, or close contact with a suspected or confirmed COVID-19 person. Commanders are encouraged to make a calculated risk

assessment in order to sustain mission essential requirements and take actions to mitigate further exposure to others when returning quarantined personnel to duty early. Recommend following medical guidance to the highest extent possible:

The duration for quarantine is typically going to be 14 days from potential exposure. The intent is to allow personnel who have potentially been exposed to limit further interaction during the virus incubation period as well as provide a ready reserve force.

If a member is quarantined due to potential exposure from a suspected COVID-19 PUI, the member should remain quarantined until testing results for the suspected COVID-19 PUI.

If the suspected COVID-19 PUI testing results come back negative, the quarantined member may return to duty (RTD) with no medical clearance required.

If the suspected COVID-19 PUI testing results come back positive, the member will be given an order to isolate themselves for a minimum period of 72 hours after symptoms dissipate, no less than 7 days from the onset of symptoms, or when a COVID-19 test comes back negative. For active duty members, this isolation order will come from their Squadron Commander. For civilian personnel, to include dependents, civilian employees, and contractors, this order will come from a public health official.

Question: In the event a restricted travel exception to policy is granted, can members drive out of state?

Answer: Members are advised to travel with a copy of the Attorney General's memo (dated 20 March 2020), their Common Access Card, and a signed copy of the approved exception to policy.

Question: How do tenants report PUI and positive COVID-19 individuals to 50 SW?

Answer: Tenants will report PUI and positive COVID-19 information to the CAT at 50SW.XP.CrisisActionTeam@us.af.mil

Question: What are the current COVID-19 definitions used for 50 SW tracking purposes?

Answer:

Quarantined - A person who has been seen by a medical professional and was placed on quarters for something other than COVID-19.

Quarantined - An asymptomatic person who has been potentially exposed to COVID-19 (through travel, either locally or internationally, or close contact with a suspected or confirmed COVID-19).

Isolated - A symptomatic person who has been potentially exposed to COVID-19 (through travel, either locally or internationally, or close contact with a suspected or confirmed COVID-19).

PUI (Person Under Investigation) - A symptomatic (fever, coughing, and shortness of breath) person who is either awaiting testing or test results from a medical professional for COVID-19. These members are also counted as isolated.

COVID Positive - A person who has been tested by a medical professional and confirmed positive for COVID-19. These members are also counted as isolated.

Reintegrated - A person who has returned/recovered from Directed Quarantine, Directed Isolation, OR Confirmed Positive with no symptoms.

Recovered - A person who has returned/recovered from Confirmed Positive COVID with no symptoms. If you test positive for COVID-19 you are to remain home until 3 days after your symptoms subside and this must be at least 7 days after the onset of symptoms. You must also be cleared by your PCM. This is a change from the 2 negative test rule previously distributed. These members will also be counted as Reintegrated.

Question: How does reporting remain PII/HIPAA compliant?

Answer:

Privacy Protection of COVID-19 Information

All PII should be collected, used, and disclosed only as necessary to safeguard public health and safety in accordance with relevant privacy laws, regulations, and policies.

Only collect and disclose the minimum amount of PII regarding COVID-19 necessary to persons with an authorized need to know.

Actively minimize the amount of data sharing so as to safeguard the PII for access by those persons with a need to know.

Examples of PII

Recall Roster – names linked with phone numbers and email addresses

Test Result - employee reports positive test results for COVID to his/her supervisor

****For these uses, this is not patient info, but is considered employment- and readiness-related info. Therefore, this info not protected health info under the Health Insurance Portability and Accountability Act (HIPAA), but should be protected as PII consistent with the Privacy Act.**

PII Best Practices

Limit Distribution of PII to those who have a valid, need to know.

Employ good data security practices – encrypting email transmission of PII (NIPR, SIPR, or JWICs).

Do Not transmit names, social security numbers, personal phone numbers, or health or readiness status via unencrypted email.

Do Not use personal email accounts to transmit PII.

Do Not use collaboration platforms to communicate PII (work-related blog or instant message system).

Do Not Post recall roster or excel spreadsheets with PII to internal shared drives, SharePoint, or similar sites WITHOUT proper safeguards and role-based access restrictions.

HIPAA Rules do not apply to employment records.

Question: Who is the wing's primary source of Corona information (e.g., WHO, CDC, AF/SG, 21 Med Group, CNN, Fox News) to ensure clear, consistent, and accurate information is being provided?

Answer. 50 SW is relying on 21 MDG, who is working closely with colleagues at other Military Treatment Facilities, the Colorado Department of Public Health & Environment, USSF Surgeon General's office and the Defense Health Agency. 21 MDG is utilizing the Defense Health Agency, State and CDC guidance to inform our decision making.

Question: Who needs testing for COVID-19?

Answer: The 21st Medical Group is currently following state recommendations for COVID-19 testing and is utilizing virtual appointments/telehealth for screening and the COVID Test Site (CoTS) for collecting sampling of those that meet criteria. However, not all personnel need testing. Those in non-mission essential positions who are already teleworking and practicing social distancing do not need testing for mild symptoms. Those that fall into this category should self-isolate, utilize over the counter medications, and report worsening symptoms to their PCM by contacting the appointment line.

Question: How do I get an appointment?

Answer: Call the appointment line at 524-CARE (2273). In order to minimize the spread of the virus and protect our patients and healthcare workers, the 21st Medical Group has moved to mostly telehealth/virtual appointments. At the provider's discretion, face to face appointments are available.

Mental Health services continues to be available for our patients and staff are utilizing a combination of telehealth (virtual appointments) and face-to-face appointment. Call respective MH clinic for directions.

SAFB MH is 567-4619

Question: When should I go to the Emergency Room?

Answer: As always, the emergency room should be utilized only for urgent conditions that threaten life, limb or eyesight. If directed to go to the ER by medical professional, proceed directly to the ER.

Most healthy individuals without chronic medical conditions will have mild symptoms and can effectively manage their symptoms at home over the evening or weekend. Personnel with mild symptoms should self-isolate, utilize over the counter medications as needed for symptom management, and call the appointment line.

Question: What specialty services are still open at the 21 Medical Group?

Answer: Physical Therapist is still seeing patients, however schedules have been modified to ensure adequate social distancing within the clinic. The SAFB PT clinic in T-135 has been closed in order to consolidate services to one location.

Dental Clinic is seeing dental emergencies, Class 3 patients in pain, and Class 4 to sustain readiness posture.

Women's Health is taking appointments and is maximizing telehealth/virtual appointments.

Optometry has limited appointments with those required for readiness/emergencies taking priority.

Please do NOT walk in for any unscheduled medical appointment/needs. Only exception at this time is the pharmacy. We are asking that if anyone has cold/flu like symptoms not to come to the MTF.

Question: What can I do to decrease the spread of the virus?

Answer: All we have available to slow the spread of this virus is social distancing which is why so many people have been directed to telework, Col Smith has instituted his guidance for more rigorous cleaning procedures, restricted RA access, facility closures etc. and the medical group has transitioned to telehealth to the maximum extent possible.

Other effective ways to reduce the risk to you and your family is to practice social distancing, good hand washing, cover your coughs and sneezes, avoid touching your eyes, nose, and mouth with unwashed hands, self-isolate at home if you are sick, and avoid contact with people you know are considered high risk.

Question: Who is considered high risk?

Answer: Older adults >65 years and those with chronic medical conditions like heart disease, diabetes, immunocompromise, and lung disease. Particularly those with poorly control chronic medical conditions are more likely to experience more severe illness.

Question: How are lab samples being tested and what is the expected turnaround time?

Answer: The Epidemiology Reference Lab at the United States Air Force School of Aerospace Medicine (USAFSAM) at Wright Patterson AFB (WPAFB) is the only AF Clinical Laboratory chosen by the Defense Health Agency to process test samples from DoD MTF's.

The 21st Medical Group moved to utilizing USAFSAM last week due to noticing significant delays in receiving results from state and private labs. It is our hope that centralizing the testing at USAFSAM will speed up the time it takes to get confirmatory diagnosis. USAFSAM is working around the clock and curtailing some routine lab processing in order to focus efforts on returning COVID-19 results as quickly as possible.

The goal is to have results within 72-96 hours. Medics are checking for results 7 days/week in order to ensure results are returned as quickly as possible to the member and guide leadership decision making.

Question: Is the Peterson Point of Testing/COVID Testing Site (CoTS) just for military or for all (Mil, Civ, CTR)?

Answer: CoTS is currently available for beneficiaries enrolled in the 21 Medical Group. Many network facilities in the local area are no longer performing testing due to the overwhelming number of people seeking testing and limited resources; as a result testing is being limited to those in more critical condition.

Fort Carson is doing has a similar Point of Testing process for their beneficiaries.

Question: How will ASIMS reflect COVID-19 responses from PCMs?

Answer: In order to help units classify service members in isolation or quarantine, ASIMS has modified the quarter form to allow for longer duration only for COVID-19 concerns.

ASIMS now allows quarters for 7 days or 14 days with and without symptoms.

At 21 MDG, we will use ASIMS for quarters the following way effective 25 Mar 2020:

- 1) Any member who becomes a Person Undergoing Investigation will be given "7 days with symptoms"
- 2) Any member who has a positive COVID-19 test will be given "14 days with symptoms". Members will be assessed daily for early return to duty.
- 3) Any member who has a negative COVID-19 test will be returned to duty by quarters cancelation.
- 4) Any member who has close contact with a confirmed positive COVID-19 patient will be placed on "14 days without symptoms"
- 5) Any members who require quarters for other medical reasons will receive 24 hours, 48 hours, or 72 hours. No quarters will be given for more than 72 hours.

This will not be used for social distancing or restriction of movement.

Leadership should be receiving quarters notifications via e-mail when quarters are placed and when canceled. Leadership can also review their members on quarters but accessing the ASIMS website.

For all members who are seen off base and are tested for COVID-19, they should call appointment line 719-526-2273 opt 1 and schedule a virtual visit with their PCM to review COVID-19 testing. The PCM will verify care received and determine whether quarters are warranted.

Question: How do you safely interact with personnel in Quarantine or Isolation?

Answer: Maximize electronic means of communication (Facetime, Skype, Google Duo, FB Messenger, personal email without PII/HIPPA). If face to face interaction is required, do not enter domicile, maintain a greater than six foot distance, and ask symptomatic individual to wear a mask.

Question: What is the notification procedure from 21 MDG?

Answer: Personnel tested by the 21 MDG and/or 21 MDG beneficiaries.

- PUI – Quarters 7 days w/symptoms
- Close Contact w/positive COVID-19 – tracked by 21 MDG Public Health and placed on Quarters for 14 days without symptoms
- Positive COVID-19 - AD, GS, and Family (on base residence) will be notified by PCM. 21 MDG CAT will initiate chain of command notification to include 21 MDS/CC for all personnel assigned to SAFB, Installation CC, and Grp/CC

** For anyone receiving off base care, reporting results incumbent on member

Question: What precautions do we need to take to ensure our telework laptops are properly scanned?

Answer: The current policy is that laptops need to be connected to the AFNet every 30 days to stay network compliant. The 690 NSS/AFIN Mission Assurance Center is looking into a temporary exemption of this policy given the current situation. Per 690 Network Security Squadron, all standard security practices (patching) remain in effect and government laptops do receive patches through VPN

connections; however, with the VPN limitations, patching efficiency/effectiveness may be degraded. The length of time required to receive these patches is dependent on the number of patches, network connection, and other processes running on the computer. For individuals that VPN daily, an hour or two should suffice.

Question: Will machines that haven't been on the net for a while be kicked off the domain?

Answer: DISA is assessing how formally/technically implement that. If implemented, the 50 SW CAT and or the 50 SCS will develop a plan to mitigate impact to our teleworkers.

Question: Is there anything special we need to do once this concludes and we come back to work?

Answer: Yes! Your government laptops MUST be plugged back into the same docking station or Ethernet port used previously. Any laptop plugged into a new location will cause the port to be disabled and will require 50 SCS technicians to support. Also, depending on the number of patches the laptop needs, it may take a significant amount of time to boot back up once returning to the office. All teleworkers should plan accordingly.

Question: Is there anything I can do to help connect to VPN?

Answer: With thousands of Airmen now in a telework environment, please login/logout of shared resources when not needed and consider what remote work can be accomplished off-line or during non-traditional hours. Current VPN capacity is fully utilized during CONUS daylight hours. As expanded remote capabilities are available, they will be formally announced.

Question: Are pregnant women at higher risk of developing COVID-19 or complications if they were to test positive?

Answer: Pregnant women are at higher risk for developing complications from respiratory illnesses, such influenza. At this time, COVID-19 does not elevate that risk enough to warrant additional measures. Pregnant women should follow the same recommendations being given to the general public. Women who have high-risk pregnancies should consult with their obstetrician for additional recommendations.

At this time, there is no evidence that indicates pregnant women are at increased risk from COVID-19. At this time, no newborns have tested positive for COVID-19 who were born to COVID-19 positive mothers. The virus has not been found in amniotic fluid suggesting that it can't spread to unborn children. Additionally, the virus has not been found in breast milk so breastfeeding is felt to be safe.

RECOMMENDATIONS:

- 1) Pregnant women should practice social distancing, practice good respiratory and hand hygiene, and avoid infectious people.
- 2) If pregnant woman develops fevers, cough, and/or shortness of breath, they should contact their obstetrician to determine appropriate evaluation.
- 3) Partners should consider performing activities to limit the pregnant patient's exposure, such as shopping for food.

4) Partners have no limitations. If they develop symptoms of COVID-19, they should isolate away from pregnant partner until they have cleared the virus.

5) Pregnant women can still work. If possible, measures to provide social distancing are recommended. Pregnant women should avoid sick co-workers and the work environment should encourage sick employees to not come in.

Question: Is it safe to take ibuprofen during this COVID-19 pandemic?

Answer: At this time the existing literature is unclear as to whether ibuprofen has any impact on COVID-19 severity. If individuals with heart or kidney disease were to test positive for COVID-19, recommend discussing alternative medications with their primary care manager.